

**UNITED STATES DISTRICT COURT  
MIDDLE DISTRICT OF NORTH CAROLINA  
ELECTRONIC FILING ATTORNEY REGISTRATION FORM**

This form is used to register for an account on the Middle District of North Carolina Electronic Filing System. Registered attorneys will have privileges to electronically submit documents and to view the electronic docket sheets and documents. By registering, attorneys consent to receiving electronic notice of filings as well as agreeing to file all documents electronically through the system. The following information is required for registration:

**PLEASE TYPE**

Mr. / Mrs. / Ms. (circle one)

First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Last Name: \_\_\_\_\_ If appropriate circle one: Senior / Junior / II / III

Bar ID Number: \_\_\_\_\_

Are you currently in good standing to practice in the Middle District of North Carolina? Yes \_\_\_\_\_ No \_\_\_\_\_

Firm Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Have you relocated to this address within the past year? Yes \_\_\_\_\_ No \_\_\_\_\_

Voice Telephone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Internet E-Mail Address: \_\_\_\_\_

**Attorneys seeking to file documents electronically must be admitted to practice in the United States District Court for the Middle District of North Carolina pursuant to LR 83.1.**

Other Courts of Registration for Electronic Filing System: \_\_\_\_\_

**By submitting this registration form, the undersigned agrees to abide by all Court rules, orders and policies and procedures governing the use of the electronic filing system. The undersigned also consents to receiving notice of filings pursuant to Fed. R. Civ. P. 5(b) and 77(d) and Fed. R. Crim. P. 49(b)-(d) via the Court's electronic filing system as well as agreeing to file all documents electronically. The combination of user id and password will serve as the signature of the attorney filing the documents. Attorneys must protect the security of their passwords and immediately notify the court if they learn that their password has been compromised by an unauthorized user.**

\_\_\_\_\_  
Signature of Registrant

\_\_\_\_\_  
Date

Submit completed Registration Form to: John S. Brubaker, Clerk  
United States District Court  
Attention: ECF Attorney Registration  
Room 401  
324 W. Market Street  
Greensboro, NC 27401

Dated March 1, 2005